	CLAIMS ONLY		Application Number 10 680393		Filing Date
			Applicant(s)		

* May be used for additional claims or amendments

CLAIMS	AS FILED 1-19-06		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT			*		*		*	
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend	Indep	Depend
1							51						
2							52						
3							53						
4							54						
5							55						
6							56						
7							57						
8							58						
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43							93						
44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
Total Indep							Total Indep						
Total Depend							Total Depend						
Total Claims							Total Claims						

CLAIMS ONLY

Application Number	Filing Date
10 680393	
Applicant(s)	

* May be used for additional claims or amendments

CLAIMS	AS FILED 1-12-0_		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT			*		*		*	
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend	Indep	Depend
101							151						
102							152						
103							153						
104							154						
105							155						
106							156						
107							157						
108							158						
109							159						
110							160						
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143							193						
144							194						
145							195						
146							196						
147							197						
148							198						
149							199						
150							200						
Total Indep	3						Total Indep						
Total Depend	85						Total Depend						
Total Claims	88						Total Claims						